

## Message Text

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ACTION ARA-14

INFO OCT-01 ISO-00 AID-05 OES-07 IGA-02 HEW-04 MED-02

EB-08 TRSE-00 OMB-01 CIAE-00 INR-07 NSAE-00 SS-15

SP-02 NSC-05 PA-01 PRS-01 USIA-06 L-03 /084 W

-----031369 081425Z /50

R 081100Z AUG 77

FM AMEMBASSY BRASILIA

TO SECSTATE WASHDC 3150

INFO AMCONSUL RIO DE JANEIRO

AMCONSUL SAO PAULO

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ALSO PASS AID/PHA/POP

E.O. 11652: N/A

TAGS: SPOP BR

SUBJECT: GOB FAMILY PLANNING PROGRAM

REF: (A) BRASILIA A-80 (B) BRASILIA 3988

1. SUMMARY. IN HIGHLY-CONTROVERSIAL, PRECEDENT-SETTING MOVE, GOB JULY 27 ANNOUNCED OFFICIAL FAMILY PLANNING PROGRAM TO BEGIN IN 1978 AS PART OF AN EXPANDED MATERNAL-CHILD HEALTH CARE SYSTEM. THE PROGRAM WILL INCLUDE FREE CONTRACEPTIVES UNDER MEDICALLY CONTROLLED DISTRIBUTION RATHER THAN CBD. WHILE OF LOW PRACTICAL SIGNIFICANCE, IT HAS HIGH SYMBOLIC CONTENT AND IS FIRST OF ITS KIND IN BRAZILIAN HISTORY. REACTION TO IS HAS BEEN STRONG EMOTIONAL AND, TO A LARGE DEGREE, NEGATIVE -- ESPECIALLY BY THE CHURCH. WE STRONGLY RECOMMEND CONTINUED CAUTION BY US POPULATION ASSISTANCE PROGRAM AND ITS INTERMEDIARIES IN APPROACHING POPULATION ISSUES IN BRAZIL. END SUMMARY.

2. AS FORECAST REFERENCE MESSAGES, HEALTH MINISTER PAULO MACHADO PRESENTED PROPOSAL FOR OFFICIAL GOB COMPONENT IN FAMILY PLANNING

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AS PART OF MATERNAL CHILD HEALTH CARE PROGRAM TO NATIONAL COUNCIL FOR SOCIAL DEVELOPMENT (CDS - HEADED BY PRESIDENT GEISEL) ON JULY 27. AFTER DISCUSSION OF PRESENTATION OF 100 PAGES CONVERGING DEMOGRAPHIC, HEALTH, SOCIAL AND ECONOMIC FACTORS (EMBASSY IS SEEKING TO OBTAIN COPY OF MACHADO'S REPORT), CDS APPROVED PROPOSAL AND PROGRAM WAS ANNOUNCED ON JULY 28.

3. HEALTH MINISTRY HAD ALREADY BEGUN A NEW PROGRAM OF MATERNAL CHILD ASSISTANCE (PAMI). IN 1977, ACTIVITY CONSISTS PRIMARILY OF IMMUNIZATION PROGRAM. PAMI IS INTENDED TO SERVE NEEDS OF PREGNANT AND POST NATAL WOMEN AND OF CHILDREN UNDER AGE OF 20 IS AIMED AT REDUCING MATERNAL-CHILD ILLNESS AND MORTALITY, AND INCLUDES ASPECTS OF MENTAL HEALTH, NUTRITION, AND SANITATION AS WELL AS PHYSICAL HEALTH. PAMI WAS ALLOCATED FUNDING OF APPROXIMATELY \$50 MILLION PER YEAR FOR FOUR YEARS PERIOD 1978 THROUGH 1981 AND WILL UTILIZE POSTS, CLINICS, AND HOSPITALS OF MINISTRY OF HEALTH, OF STATE PUBLIC HEALTH SYSTEM (UNDER STATE SECRETARIES OF HEALTH), AND OF NATIONAL SOCIAL WELFARE/MEDICAL CARE SYSTEM (INPS).

4. FP COMPONENT OF PAMI IS DESIGNATED AS PROGRAM FOR PREVENTION OF HIGH RISK PREGNANCY (PPGAR), WITH SEPARATE FUNDING OF \$3.7 MILLION FOR 1978-81 PERIOD. HALF OF THIS WILL BE USED FOR PURCHASE OF CONTRACEPTIVES (INCLUDING APPROXIMATELY 2 MILLION CYCLES OF PILLS TO BE PURCHASED BY GOB FROM NATIONAL COMPANIES THROUGH COMPETITIVE BIDDING) AND HALF FOR TRAINING OF PERSONNEL (APPROXIMATELY 6,000 PROFESSIONALS - DOCTORS, NURSES, AND SOCIAL WORKERS - AND 3,000 AUXILIARY ASSISTANTS WILL BE GIVEN SPECIAL PREPARATION). PAMI EXPECTS TO SERVE 750,000 PREGNANT AND POST NATAL WOMEN DURING 4 YEARS AND ESTIMATES THAT 10 PERCENT OF THESE WILL BE "HIGH-RISK" CASES- CRITERIA INCLUDE EXTREME YOUTH (UNDER 20) AGE LIMITED OFFICIAL USE

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(OVER 30), CERTAIN PHYSICAL HEALTH PROBLEMS MENTAL PROBLEMS, FREQUENTLY OF PREGNANCIES, SOCIO-ECONOMIC FAMILY CONDITIONS, PRE-MEDICAL PREGNANCY ETC. IN SUCH HIGH RISK CASES, EXAMINING DOCTOR MAY ADVISE COUPLE OF POSSIBILITY OF CONCEPTIVE USE, POINTING OUT POSSIBLE CONFLICTS WITH RELIGIOUS OR CULTURAL BELIEFS AND SOLE RIGHTS OF COUPLE TO MAKE DECISION. IF COUPLE OPTS FOR FP, DOCTOR MAY PRESCRIBE CONTRACEPTIVES - IF COUPLE UNABLE TO AFFORD CONTRACEPTIVE (70 PERCENT ESTIMATED) PPGAR WILL FURNISH FREE. EXAMINING DOCTOR MAY NOT "COERCE" COUPLE OR ENCOURAGE CONTRACEPTIVE USE - IN PRINCIPLE DOCTOR MAY NOT PRESCRIBE OR PROVIDE FREE CONTRACEPTIVE EVEN AT PATIENT REQUEST IN NON HIGH-RISK CASES. IT WAS ESTIMATED THAT 80 PERCENT OF FP PATIENTS WOULD BE ADVISED TO USE PILL AND 20 PERCENT OTHER METHODS (CONDOM, SPERMICIDAL CREAM, AMLE PILL UNDER DEVELOPMENT IN BRAZIL, OR RHYTHM). ABORTION AND ABORTIFACIENTS (AMONG WHICH GOB CLASSES IUD) WILL BE PROHIBITED IN PPGAR AND STERILIZATION (TUBAL LIGATION OR VASECTOMY) WILL NOT BE INCLUDED (ONE PRESS REPORT SAID STERILIZATION MIGHT BE RECOMMENDED AFTER THIRD CHILD). BECAUSE OF MEDICAL INFRA-STRUCTURE REQUIREMENTS, PROGRAM WILL ACHIEVE GREATEST IMPLEMENTATION IN METROPOLITAN AREAS. NEVERTHELESS, HIGHEST PRIORITY IS PUT ON NORTHEAST REGION (50 PERCENT OF

FUNDS ASSIGNED THERE) AND SECOND ON SOUTHEAST REGION  
(OVER 1/3 OF FUNDS ASSIGNED). GOB WILL LAUNCH PUBLICITY  
CAMPAIGN FOR PAMI ON RADIO AND TV BUT NO MENTION OF PPGAR  
WILL BE INCLUDED - PRESIDENTIAL SPOKESMAN SAID GOB NOT  
SEEKING MASS ACTION BUT INDIVIDUAL LEVEL DECISION, THEREFORE PROPAGANDA  
WOULD BE COERCIVE. GOB POSITION IS THAT PHILOSOPHY OF  
OUTLINED PROGRAM IS COMPLETELY IN ACCORD WITH ITS BUCHAREST  
POLICY. MINISTER MACHADO EMERGED FROM CDS MEETING VISIBLY  
PLEASED, ACCORDING TO PRESS, AND ANNOUNCED PAMI PPGAR AS  
GREAT ADDITION TO HEALTH COVERAGE FOR MORE PEOPLE WHICH WOULD  
EXTEND BENEFITS OF MODERN MEDICAL SCIENCE - "DEMOCRATIZATION"  
OF HEALTH SERVICES.

IT IS NOT "BIRTH CONTROL" PROGRAM AS EARLY EFFECT  
EXPECTED IS SLIGHT RISE IN POPULATION GROWTH RATE.  
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MINISTER MACHADO ALSO OBSERVED THAT SINCE BRAZIL IS  
CATHOLIC COUNTRY AND CHURCH CONDEMS PILL, PROBABLY RELATIVELY  
FEW COUPLES WILL DECIDE IN FAVOR OF FP. (ALSO INDEPENDENT BRAZILIAN  
RESEARCH SHOWS LARGER FAMILIES ARE ECONOMIC ADVANTAGE  
TO URBAN AS WELL AS RURAL POOR PARTS UNDER PRESENT CONDITIONS).

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SP-02 NSC-05 PA-01 PRS-01 USIA-06 L-03 /084 W  
-----031695 081426Z /50

R 081100Z AUG 77  
FM AMEMBASSY BRASILIA  
TO SECSTATE WASHDC 3151  
INFO AMCONSUL RIO DE JANEIRO  
AMCONSUL SAO PAULO

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5. SOME OF RELEVANT BRAZILIAN DEMOGRAPHIC DATA WAS

QUOTED IN PRESS REPORTS OF MACHADO'S PRESENTATION:

- URBANIZATION INDEX - 60 PERCENT
- POPULATION UNDER 20 YEARS OLD - 46 PERCENT
- COMBINED UNDER -20 YEARS OLD - AND WOMEN OF FERTILE AGE (15-49): 80 MILLION OR 71 PERCENT OF POPULATION
- INFANT MORTALITY RATE - 96/1000 LIVE BIRTHS (RANGING FROM 59/1000 IN BRASILIA TO 256/1000 IN RECIFE)
- DEATH RATE - 8/1000/YEAR
- LIFE EXPECTANCY - 61 YEARS
- CURRENT POPULATION GROWTH RATE - 2.7 PERCENT
- 1950-60 GROWTH RATE - 3.1 PERCENT
- 1960-70 GROWTH RATE - 2.8 PERCENT
- "REASONABLE" GROWTH RATE FOR BRAZIL - 1.8 TO 2.0 PERCENT (ACCORDING TO MINISEER RANGEL REIS)

6. HIGHLIGHTS OF EARLY REACTION TO PPGAR:

A. OTHER GOVERNMENT OFFICIALS : SOCIAL WELFARE MINISTER NASCIMENTO E SILVA INTERIOR MINISTER RANGEL REIS, AND PLANNING MINISTER VELLOSO EXPRESSED SUPPORT FOR PROGRAM TO PRESS - OTHERS LIMITED OFFICIAL USE

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WERE SILENT.

B. CONGRESS: BOTH OPPOSING AND SUPPORTING STATEMENTS INCLUDED REFERENCES TO FOREIGN INVOLVMENT THOSE OPPOSING ALLEGED PPGAR

WAS INFLUENCED BY AND RESPONSIVE TO FOREIGN INTEREST - THOSE SUPPORTIVE SAID PPGAR SHOULD ALLOW ELIMINATION OF INSTITUTIONS REPRESENTING FOREIGN INTERESTS IN BRAZIL.

C. MEDICAL: QUOTED OPINION WAS NEARLY UNANIMOUS IN BEING MILDLY SUPPORTIVE OF FP CONCEPT, IN EXPRESSING GREAT SCEPTISM THAT GOVERNMENT HEALTH SERVICE SYSTEM COULD IMPLEMENT PROGRAM AS PLANNED (OR THAT PROGRAM WILL AFFECT HEALTH OR BIRTH RATE), AND IN WARNINGS OF HEALTH RISKS OF PILL USE AND NEED FOR FREQUENT MEDICAL ATTENTION TO USERS (EVEN DR. ELSIMAR COUTINHO, LEADING BRAZILIAN CONTRACEPTIVE RESEARCHER AND FP ADVOCATE ), CONSTERNED PRESENT PILL UNSATISFACTORY METHOD OF CONTRACEPTION), CONSERVATIVE MEDICAL ASSOCIATION OF RIO DE JANEIRO SAID PILLS WERE MORE DANGEROUS THAN PREGNANCY.

D. ECONOMISTS GENERALLY PLEASED PROGRAM, ONE CALLING IT A NEW "ABOLITION OF SLAVERY" WHICH SHOULD HAVE STARTED LONG AGO SO BRAZIL WOULD NOW HAVE HALF AS MANY PEOPLE LIVING WITH MUCH GREATER INCOME AND QUALITY OF LIFE. THIS SECTOR CALLED FOR REVOKING OF BRAZILIAN PRO-NATALIST LEGISLATION (EG, SALARY BONUSES BASED ON NUMBER OF CHILDREN AND SUBSIDIES FOR MATERNITY BENEFITS).

E. CHURCH: WITH NEGLIGIBLE EXCEPTION, CHURCH SPOKESMAN EXPRESS STRONG OPPOSITION TO PROGRAM. TYPICAL STATEMENTS WERE : "DISASTER FOR PEOPLE AND COUNTRY", "CRIME

AGAINST POOR", "WILL LEAD BRAZIL TO BECOMING A CEMETERY WITH ONLY OLD PEOPLE", "START BRAZIL ON PATH OF PERMISSIVENESS, FROM DIVORCE TO PILL TO ABORTION TO HOMOSEXUALITY TO END OF COUNTRY", "BRAZIL NEEDS SOCIAL JUSTICE, WITH PROFOUND AND RADICAL REFORMS, TO SOLVE MISERY OF POOR - NOT PILL", LIMITED OFFICIAL USE

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"LARGE FAMILIES ARE EFFECT, NOT CAUSE OF POVERTY - CAUSE IS NATIONAL AND INTERNATIONAL SOCIAL INJUSTICE", AND "PROGRAM WILL USE BRAZILIANS AS GUINEA PIGS TO UNLOAD STOCKS OF PILLS WHICH MULTINATIONAL PHARMACEUTICAL COMPANIES ARE PROHIBITED FROM SELLING IN ADVANCED COUNTRIES".

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ACTION ARA-14

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R 081100Z AUG 77  
FM AMEMBASSY BRASILIA  
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7. BEMFAM STATED THAT ITS IDEAS HAD FINALLY TRIUMPHED AND PREDICTED PPGAR WOULD EXPAND TO INCLUDE ALL AGES AND OTHER CRITERIA FOR CONTRACEPTIVE USE. BEMFAM ADDED THAT IT HAD NEVER CONTEMPLATED NATIONAL PROGRAM, ONLY DEMONSTRATIONS WHICH WOULD CONTAIN - OFFERED TO ASSIST PPGAR, INCLUDING CONTACTS WITH FOREIGN GOVERNMENTS FOR POSSIBLE ASSISTANCE - AND POINTED OUT IT WAS ALREADY OPERATING IN OVER 500 MUNICIPALITIES IN NORTHEAST REGION WITH ACCESS TO OVER 9 MILLION PEOPLE AND ACHIEVING GOOD

PUBLIC ACCEPTANCE. GOVERNMENT SPOKESMAN INDICATED AWARENESS OF ASPECTS OF BEMFAM PROGRAM CONTRADICTORY TO PPGAR PHILOSOPHY (EG CBD APPROACH WITH LITTLE MEDICAL INVOLVEMENT, ADVOCACY OF FP, EXPERIMENTAL USE OF IUD) AND EXPRESSED NEED TO MAKE CAREFUL, UNHURRIED STUDY OF ITS ACTIVITIES. MINISTER MACHADO SAID BEMFAM OUGHT TO CONFORM TO PPGAR POLICY BUT DIFFICULT TO FORCE COMPLIANCE SINCE BEMFAM IS PRIVATE ENTITY.

(HEALTH MINISTRY'S COORDINATOR FOR NORTHEAST REGION IN WHAT MAY HAVE BEEN PERSONAL OPINION SINCE IT WAS NOT CORROBORATED BY OTHER SOURCES WAS REPORTED BY "O LIMITED OFFICIAL USE

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ESTADO DE SAO PAULO " AUG 3 AS TO HAVE SAID ALL AGREEMENTS BETWEEN STATE HEALTH SECRETARIES AND NON OFFICIAL ORGANIZATIONS, ESPECIALLY BEMFAM, WOULD BE CANCELED AS CONSEQUENCE OF PAMI/PPGAR).

8. COMMENTS.

A. IN FACE OF FOLLOWING POPULATION FACTS IN BRAZIL --

- MORE THAN 3 MILLION AND POSSIBLY AS MANY AS 4 MILLION BRAZILIAN WOMEN ALREADY ON PILL.

- ANY WOMAN WHO CAN AFFORD PRIVATE DOCTOR CAN FIND ONE WHO WILL PRESCRIBE PILL AS MENSTRUATION REGULATOR". (BRAZILIAN LAW PROHIBITS PRESCRIBING CONTRACEPTIVES AND ALLOWS PILL SALES ONLY WITH PRESCRIPTION, AT PRICES FROM \$0.48 TO \$-.30 PER CYCLE)

- THERE IS GENERAL AGREEMENT THAT ABORTION RATE (ILLEGAL, EXCEPT IN FEW CASES) IS AT LEAST 1 1/2 MILLION/YEAR AND SOME ESTIMATES ARE AS HIGH AS 2 1/2 MILLION/YEAR.

- BEMFAM IS GIVING STATE PUBLIC HEALTH SYSTEM SEVERAL MILLION CYCLES OF PILLS ANNUALLY FOR FREE CBD---- SIGNIFICANCE OF PPGAR AS PLANNED AND FUNDED IS MORE SYMBOLIC THAN PRACTICAL. ALL PARTIES, PRO AND CON, AGREE THAT PROGRAM BROKE TABU, IF NOTHING ELSE.

B. WE SHARE VIEWS EXPRESSED THAT PROGRAM WOULD BE DIFFICULT, IF NOT IMPOSSIBLE, TO IMPLEMENT AS PLANNED. GIVEN TRADITIONAL BRAZILIAN FLEXIBILITY INTERPRETATION AND IMPLEMENTATION OF LEGISLATION AND OFFICIAL GUIDELINES, WE WOULD EXPECT ACTUAL FUTURE PROGRAM TO BE QUITE DIFFERENT THAN PRESENT DESCRIPTION AND BELIEVE VEHEMENCE OF CRITICS' COMMENTS SHOWS THEY EXPECT THIS ALSO.

C. WE RECOMMEND STRONGLY CONTINUED CAUTION ON PART OF US POPULATION ASSISTANCE PROGRAM AND ITS INTERMEDIARIES IN APPROACHING POPULATION ISSUES IN BRAZIL OF RESPONDING TO ANY BEMFAM INITIATIVES IN CONNECTION WITH PPGAR. CLEARLY, SENSITIVITY LIMITED OFFICIAL USE

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REMAINS, HIGH (IF NOT HEIGHTENED) AND FOREIGN ORIGIN POPULATION  
ACTIVITIES RUN RISK OF BEING COUNTERPRODUCTIVE IN  
PRESENT CLIMATE. EVEN COMMENTS ON UNSATISFACTORY  
NATURE OF PPGAR WOULD BE BETTER AVOIDED. END COMMENT.  
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